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Bib Data Sheet

CONFIRMATION NO. 9367

<b>SERIAL NUMBER</b> 10/579,661	<b>FILING OR 371(c) DATE</b> 05/17/2006 <b>RULE</b>	<b>CLASS</b> 623	<b>GROUP ART UNIT</b> 3733	<b>ATTORNEY DOCKET NO.</b> 26786-520-NATL
<b>APPLICANTS</b> Michael Prosser, Carlsbad, CA; <b>** CONTINUING DATA *****</b> <i>AY</i> This application is a 371 of PCT/US04/40244 12/02/2004 which claims benefit of 60/526,241 12/02/2003 <b>** FOREIGN APPLICATIONS *****</b> <i>AP</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 01/23/2007</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 24
<b>INDEPENDENT CLAIMS</b> 3				
<b>ADDRESS</b> 35437				
<b>TITLE</b> Vertebral body replacement cage assembly				
<b>FILING FEE RECEIVED</b> 400	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	